| Staff use: Date | _ |
|-----------------|---|
| Time            |   |

## **ZONING CONSULTATION REQUEST FORM**

Flathead County Planning and Zoning 1035 First Avenue West, Kalispell, MT 59901 Tel 406-751-8200 Fax 406-751-8210

Please complete the following questions and attach required supporting documents. Upon receipt, a planner will contact you to schedule a preapplication conference.

| 1.  | PROPERTY OWNER:                                  |                                | PHONEPHONE         |                                    |             |
|-----|--|--------------------------------|--------------------|------------------------------------|-------------|
| 2.  | TECHNICAL ASSISTANCE:                            |                                |                    |                                    |             |
| 3.  | PROPERTY INFORMATION: Trace                      | ct in Section                  | Township           | Range                              |             |
| Su  | bdivision/ Lot, if any                           | Assessor's Number              |                    |                                    |             |
| Ph  | ysical Address                                   | Ac                             | res]               | Fire District                      | _           |
| Scl | hool District                                    | Zoning                         | Neigh              | oorhood Plan                       |             |
| Ex  | isting Use and Structures on Property            |                                |                    |                                    | <u> </u>    |
| 4.  | PROPOSAL: Proposed new zonir                     | ıg:                            |                    |                                    |             |
| Ex  | planation why new zoning is being sough          | nt:                            |                    |                                    |             |
|     |  |                                |                    |                                    |             |
|     |  |                                |                    |                                    |             |
|     |  |                                |                    |                                    |             |
|     | Flathead County Growth Policy Map). land use map |                                |                    |                                    |             |
| 6.  | ATTACHMENTS: Please attach all                   |                                |                    |                                    |             |
|     | USGS topographic map (8 ½" x :                   | 11" minimum) showing the       | surrounding area   | with the following information     | shown:      |
|     | property boundaries, access roads,               | nearby creeks and streams,     | municipal bound    | aries, and airports, as applicable | ;           |
|     | Vicinity map (8 ½" x 11" minimum                 | 1)                             |                    |                                    |             |
|     | General site information:                        |                                |                    |                                    |             |
|     | General location App                             | proximate boundaries of ex     | isting tract       | Wildlife range                     |             |
|     | Natural features Exi                             | isting structures and public   | improvements       | Steep Slopes                       |             |
|     | Existing Utilities Kno                           | own easements and rights o     | f way              | Wetlands                           |             |
|     | Drainages/Swales Wa                              | nter resources (rivers, stream | ns, pothole lakes) | 100-year floodpl                   | ain, if any |